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UTILITY									
PATENT APPLICATION									
TRANSMITTAL									

9351-197 Attorney Docket No. LAMONT First Inventor PRESSURE CONTROL SYSTEM FOR LOW PRESSURE OPERATION Title

(Only for ne	w nonprovisiona	l applications unde	er 37 C.F.R. 1.53(b))	Ехрі	ress Mail Label N	lo.						
See MPEP o		LICATION E	LEMENTS t application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450								
2.	Submit an original at Applicant claim Gee 37 CFR 1.2 Specification oreferred arrange Descriptive title Cross Reference Statement Rega Reference to serior a computer programme Background of the Brief Summary of the Applicant of the Brief Summary of the Applicant of the Brief Summary of the Applicant of the Applicant of the Brief Summary of the Applicant of the A	ement set forth be- of the Invention e to Related Applic rding Fed sponsor quence listing, a te- cogram listing appear he Invention of the Invention of the Drawings (ottion	a processing) atus. Total Pages 16 ations ations aed R & D bble, andix],	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R. 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable)							
5. Oath or [a.	Newly execut Copy from a p (for a continue) DELETION Signed statem named in the p 1.63(d)(2) and blication Data S	ed (original or corior application ation/divisional volume attached deletion application, see 1.33(b).	(37 CFR 1.63 (d)) vith Box 18 complete R(S) ng inventor(s) se 37 CFR CFR 1.76	13.	Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No:/ Prior application information: Examiner Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.												
19. CORRESPONDENCE ADDRESS												
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Signature	, , , , , , , , , , , , , , , , , , , ,	1/2	8111				Date	November 19, 2003				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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for FY 2004								First Named Invent				LAMONT				
Effective 10/01/2003. Patent fees are subject to annual revision.								Examiner Name					n/a			
Applicant claims small entity status. See 37 CFR 1.27								Art Unit n/a								
TOTAL AMOUNT OF PAYMENT (\$) 77								OO Attorney Docket No. 9351-197								
METHOD OF PAYMENT (check all that apply)								FEE CALCULATION (continued)								
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SUBMITTED BY								(Complete (if applicable))								
Name (Print/Type) H. Samuel Frost								Registration No. (Attomey/Agent) 31,696 Telephone (416) 364-7311					311			
Signature													Date	November 1	9. 2003	

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